



TRUCK AND PARTS, INC.

D.M. & M.D.

BRAY TRUCK AND PARTS, INC.

"Geared To Serve You"

December 8, 2009



Dear Mr. Cleaver,

I have finally got our testing done for the storm water run off you requested. I have filled out some additional information on another application that would be different from the original. I did not send any more maps for I believe I have sent all that you should need for the evaluation with my original application.

After our conversation with your supervisor I think I should have all the information you should need. As I recall we are in a location where the river is already at a level of deterioration. Should you need more information from me please let me know. I am looking forward to putting this to rest as I am sure you are as well. May you have a Merry Christmas and a Happy New Year. Thank you for all of your help.

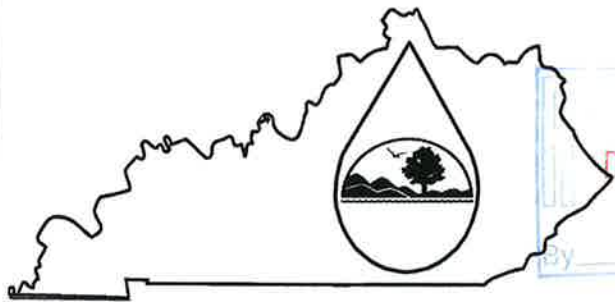
Sincerely,

Deborah Donaldson
Bray Truck and Parts Inc.

AI 104392

KPDES FORM F

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM



DEC 10 2009

PERMIT APPLICATION

A complete application consists of this form and Form 1.
For additional information, Contact Surface Water Permits Branch, (502) 564-3410.

I. OUTFALL LOCATION

AGENCY USE

0107999

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and name the receiving water.

A. Outfall Number	B. Latitude			C. Longitude			D. Receiving Water (name)
1	39.0074	39 deg	0.41 N. 28.4	84.4737	84 deg	28.41 W. 28.4	Licking River

II. IMPROVEMENTS

A. Are you now required by any federal, state, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	No.	Source of Discharge		a. req.	b. proj.
NO					
NO TO My Knowledge AT This Time					

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

III. SITE DRAINAGE MAP

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each know past or present areas used for outdoor storage or disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

IV. NARRATIVE DESCRIPTION OF POLLUTANT SOURCES

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
1	55FT Wide X 275FT Deep Before Flow into River	1260 590425 ft.			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

ONCE A WEEK OUR SLUDGE PITS ARE SCOOPED OUT. THE GREASE, DIRT, MUD + WATER ARE PUT INTO THE DUMPSTER AND BAVARIAN WASTE DISPOSAL PICKS UP THE DUMPSTER + REPLACES IT WITH ANOTHER DUMPSTER.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table F-1
1	NO TREATMENT WE DO DISPOSE OF SLUDGE AS INDICATED IN "B" ABOVE AND BAVARIAN WASTE COMPANY PICKS IT UP.	N/A

V. NON-STORM WATER DISCHARGES

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-storm water discharges, and that all non-storm water discharges from these outfall(s) are identified in either an accompanying Form C or Form SC application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
Deborah Donaldson - Manager	Deborah Donaldson	12/08/09

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

Grabbed Storm Water Run Off During 1st 30 minutes of Rain Event on 11/19/09 + 12/7/09. We used Plastic Bottles provided by the Laboratory. Taken at Bottom of Outfall # 1

VI. SIGNIFICANT LEAKS OR SPILLS

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

To My Knowledge No Significant Leaks or Spills in the Last 3 years.

VII. DISCHARGE INFORMATION

A, B, C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Parts A, B, C, & D are included on separate pages 4 and 5.

E: Potential discharges not covered by analysis - is any toxic pollutant listed in Table F-2, F-3, or F-4, a substance which you currently use or manufacture as an intermediate or final product or by product.

☐ Yes (list all such pollutants below)

☒ No (go to Section IX)

NONE THAT ARE NOT INCLUDED IN ANALYSIS BY CARDINAL LABORATORIES - SEE ATTACHED ANALYSIS

VIII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such results below)

☒ No (go to Section IX)

IX. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in item VII performed by a contract laboratory or consulting firm?

☒ Yes (list the name, address and telephone number of, and pollutants analyzed by each such laboratory or firm below; use additional sheets if necessary).

☐ No (go to Section IX)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
Cardinal Laboratories INC.	104 North St. Wilber Ky 41071	(859) 341-9989	See Attached Report

X. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

NAME & OFFICIAL TITLE (type or print)

AREA CODE AND PHONE NO.

Mr. ☐ Ms. ☒

Deborah Donaldson - Manager

(859) 781-5566

SIGNATURE

Deborah Donaldson

DATE SIGNED

12-8-09

OUTFALL NO:

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 st 30 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 st 30 Minutes	Flow-weighted Composite		

Oil and Grease	See Attached Reports					
Biological Oxygen Demand (BOD ₅)	As per instructions - Page 4 - Attached					
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)						
Total Kjeldahl Nitrogen						
Nitrate plus Nitrite Nitrogen						
Total Phosphorus						
pH	Minimum	Maximum	Minimum	Maximum		

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 st 30 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 st 30 Minutes	Flow-weighted Composite		

[illegible]

Among the factors which would cause the data to be unrepresentative are significant changes in production level, changes in raw materials, processes, or final products, and changes in storm water treatment. When the Agency promulgates new analytical methods in 40 CFR Part 136, EPA will provide information as to when you should use the new methods to generate data on your discharges. Of course, the Cabinet may request additional information, including current quantitative data, if they determine it to be necessary to assess your discharges. The Cabinet may allow or establish appropriate site-specific sampling procedures or requirements, including sampling locations, the season in which the sampling takes place, the minimum duration between the previous measurable storm event and the storm event sampled, the minimum or maximum level of precipitation required for an appropriate storm event, the form of precipitation sampled (snow melt or rainfall), protocols for collecting samples under 40 CFR Part 136, and additional time for submitting data on a case-by-case basis.

- B. Reporting:** All levels must be reported as concentration and mass (note: grab samples are reported in terms of concentration). You may report some or all of the required data by attaching separate sheets of paper instead of filling out pages VII-1 and VII-2 if the separate sheets contain all the required information in a format which is constant with pages VII-1 and VII-2 in spacing and identification of pollutants and columns. Use the following abbreviations in the columns headed "Units."

Concentration		Mass	
ppm	parts per million	lbs	pounds
mg/l	milligrams per liter	ton	tons (English tons)
ppb	parts per billion	mg	milligrams
µg/l	micrograms per liter	g	grams
kg	kilograms	T	tonnes (metric tons)

All reporting of values for metals must be in terms of "total recoverable metal," unless:

- (1) An applicable, promulgated effluent limitation or standard specifies the limitation for the metal in dissolved, valent, or total form; or
- (2) All approved analytical methods for the metal inherently measure only its dissolved form (e.g., hexavalent chromium); or
- (3) The permitting authority has determined that in establishing case-by-case limitations it is necessary to express the limitations on the metal in dissolved, valent, or total form to carry out the provisions of the CWA. If you measure only one grab sample and one flow-weighted composite sample for a given outfall, complete only the "Maximum Values" columns and insert "1" into the "Number of Storm Events Sampled" column. The permitting authority may require you to conduct additional analyses to further characterize your discharges.

If you measure more than one value for a grab sample or a flow-weighted composite sample for a given outfall and those values are representative of your discharge, you must report them. You must describe your method of testing and data analysis. You also must determine the average of all values within the last year and report the concentration and mass under the "Average Values" columns, and the total number of storm events sampled under the "Number of Storm Events Sampled" columns.

- C. Analysis:** You must use test methods promulgated in 40 CFR Part 136: however, if none has been promulgated for a particular pollutant, you may use any suitable method for measuring the level of the pollutant in your discharge provided that you submit a description of the method or a reference to a published method. Your description should include the sample holding time, preservation techniques, and the quality control measures which you used. If you have two or more substantially identical outfalls, you may request permission from your permitting authority to sample and analyze only one outfall and submit the results of the analysis for other substantially identical outfalls. If your request is granted by the permitting authority, on a separate sheet attached to the application form, identify which outfall you did test, and describe why the outfalls which you did not test are substantially identical to the outfall which you did test.

Part VII-A

Part VII-A must be completed by all applicants who must complete Form F for all outfalls.

Analyze a grab sample collected during the first thirty minutes (or as soon thereafter as practicable) of the discharge and flow-weighted composite samples for all pollutants in this part, and report the results except use only grab samples for pH and oil and grease. See discussion in General Instructions to Item VII for definitions of grab sample collected during the first thirty minutes of discharge and flow-weighted composite sample. The "Average Values" column is not compulsory but should be filled out if data are available.



CARDINAL LABORATORIES, INC.

104 NORTH STREET • WILDER, KENTUCKY 41071 • TELEPHONE: 859-341-9989 • FAX: 859-341-5081
e-mail: Info@CardinalLabs.com • web: www.CardinalLabs.com

Analytical Report

DEBBIE DONALDSON
BRAY TRUCKING--WILDER
102 WILLIAMS WAY
WILDER, KY 41071

Cardinal Project ID 09100194
Report Date: 11/19/2009

Customer Code:

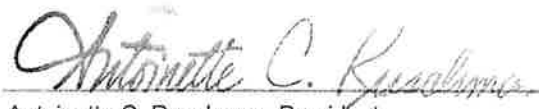
BRAYTRU2

Cardinal ID	CM19865	Program/Project:	STORMWATER	Sample Date	10/23/2009
Submit Date	10/26/2009	Sample ID/Outfall:	BOTTOM LOT-NORTH	Collection Time	4:20:00 PM
Project #/Permit #:	NOT PROVIDED	Description:	GRAB	Cooler Temp C	2.4

Analyte Name	Analysis Method Reference	Result	MDL	Units	Analyst	Analyzed Date	Time Started
Total Kjeldahl Nitrogen	EPA 351.2	1.26	0.065	mg/L	CDG	11/18/2009	3:28:00 PM
Nitrate-Nitrite as N, by FIA	EPA 353.2	0.243	0.013	mg/L	CDG	11/10/2009	9:20:00 AM
Total Phosphorus	EPA 365.1	0.312	0.006	mg/L	CDG	11/3/2009	11:03:00 AM
Chemical Oxygen Demand	HACH 8000	228	6.2	mg/L	DER	11/4/2009	8:25:00 AM
Total Suspended Solids	SM 2540 D	33.2	0.31	mg/L	DER	10/27/2009	10:04:00 AM

* BOD Q received past hold time, needs replacement - client was notified.

Results reported on wet weight basis
MDL = Method Detection Limit
End of Report



Antoinette C. Ruschman, President
Technical Director

BRAY TRUCKING--WILDER
Cardinal Sample ID CM19865

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Results are certified to meet NELAC standards





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e-mail: Info@CardinalLabs.com • web: www.CardinalLabs.com

Analytical Report

DEBBIE DONALDSON
BRAY TRUCKING--WILDER
102 WILLIAMS WAY
WILDER, KY 41071

Cardinal Project ID 09100206
Report Date: 11/19/2009

Customer Code:

BRAYTRU2

Cardinal ID	CM19931	Program/Project:	STORMWATER--BOD REPLACEMENT	Sample Date	10/28/2009
Submit Date	10/28/2009	Sample ID/Outfall:	BOTTOM LOT-NORTH	Collection Time	8:12:00 AM
Project #/Permit #:	NOT PROVIDED	Description:	GRAB	Cooler Temp C	12.4 NO ICE

Analyte Name	Analysis Method Reference	Result	MDL	Units	Analyst	Analyzed Date	Time Started
Biochemical Oxygen Demand, 5 Da	HACH 8043	<30	5.0	mg/L	JJH	10/28/2009	11:22:00 AM

* BOD - initial reading did not deplete enough. Set up again, past hold time for estimated value; 7.17 mg/L (estimate).

Results reported on wet weight basis
MDL = Method Detection Limit
End of Report

Antoinette C. Ruschman, President
Technical Director

BRAY TRUCKING--WILDER
Cardinal Sample ID CM19931

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Analytical Report

DEBBIE DONALDSON
BRAY TRUCKING--WILDER
102 WILLIAMS WAY
WILDER, KY 41071

Cardinal Project ID 09120015
Report Date: 12/7/2009

Customer Code:**BRAYTRU2**

Cardinal ID	CM20788	Program/Project:	STORMWATER	Sample Date	12/2/2009
Submit Date	12/2/2009	Sample ID/Outfall:	BOTTOM NORTH LOT	Collection Time	1:50:00 PM
Project #/Permit #:	NEW PERMIT	Description:	GRAB	Cooler Temp C	8.8 ICEPK

Analyte Name	Analysis Method Reference	Result	MDL	Units	Analyst	Analyzed Date	Time Started
pH	4500 H+ B	7.73	1	s.u.	JDF	12/2/2009	2:27:00 PM
Oil & Grease, Total	EPA 1664A	<5.0	1.20	mg/L	EAS	12/2/2009	11:42:00 AM

* pH tested upon receipt to the laboratory.

Antoinette C. Ruschman

Results reported on wet weight basis
MDL = Method Detection Limit
End of Report

Antoinette C. Ruschman, President
Technical Director

*This HAD to Be taken AT A LATER
DATE When it RAINED Because the LAB
DIDN'T GIVE US these Collection Bottles
NECESSARY for these tests with our first
Samples.*

*THANK YOU
Deb Donaldson*

BRAY TRUCKING--WILDER
Cardinal Sample ID CM20788

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